

[YOUR COMPANY NAME]

[Street Address]
[City, State, Zip]
[Tax ID / VAT Number]

INVOICE

Invoice #: _____

Billing Period: _____

Date: _____

BILL TO:

[Client Company Name]
[Client Contact Name]
[Street Address]
[City, State, Zip]

PAYMENT TERMS:

Net [30] Days
Due Date: _____

Description	Quantity/Hours	Unit Price	Amount
[Monthly Service Description]			
[Additional Fees/Usage]			

Subtotal: \$ _____
Tax (___ %): \$ _____
Total Amount: \$ _____

Payment Instructions:

Bank: [Bank Name] | SWIFT: [Code] | Account: [Number]

Please include Invoice Number as reference.